

PC

# REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date 08 MAR 2005

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference (if desired) (12 characters maximum) 766.42647A00

<b>Box No. I TITLE OF INVENTION</b>	
POWERED AIR CLEANING SYSTEM AND AIR CLEANING METHOD	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
SY-KLONE COMPANY, INC. 6451-1 Powers Avenue Jacksonville, FL 32217 United States of America	
Telephone No.	
Facsimile No.	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: US	State (that is, country) of residence: US
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
MOREDOCK, James G. 12559 Lazy Meadow Drive South Jacksonville, FL 32225 United States of America	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
State (that is, country) of nationality: US	State (that is, country) of residence: US
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)	
SHORE, Ronald J. ANTONELLI, TERRY, STOUT & KRAUS, LLP Suite 1800 1300 North Seventeenth Street Arlington, VA 22209 United States of America	
Telephone No.	703-312-6600
Facsimile No.	703-312-6666
Teleprinter No.	
Agent's registration No. with the Office	28,577
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

## Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

EHRENBURG, Eric L.  
4075 Bald Eagle Lane  
Jacksonville, FL 32257  
United States of America

This person is:

- ☐ applicant only  
☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

US

State (that is, country) of residence:

US

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- ☐ applicant only  
☐ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- ☐ applicant only  
☐ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- ☐ applicant only  
☐ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

**Box No. V DESIGNATION STATES**

Mark the applicable check-boxes below; at least one must be marked.

The following designations are hereby made under Rule 4.9(a):

**Regional Patent**

- ☒ **AP ARIPO Patent:** GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT (if other kind of protection or treatment desired, specify on dotted line) .....
- ☒ **EA Eurasian Patent:** AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- ☒ **EP European Patent:** AT Austria, BE Belgium, BG Bulgaria, CH & LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ **OA OAPI Patent:** BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line) .....

**National Patent** (if other kind of protection or treatment desired, specify on dotted line):

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> AE United Arab Emirates               | <input checked="" type="checkbox"/> GM Gambia                                    | <input checked="" type="checkbox"/> NZ New Zealand                      |
| <input checked="" type="checkbox"/> AG Antigua and Barbuda                | <input checked="" type="checkbox"/> HR Croatia                                   | <input checked="" type="checkbox"/> OM Oman                             |
| <input checked="" type="checkbox"/> AL Albania                            | <input checked="" type="checkbox"/> HU Hungary                                   | <input checked="" type="checkbox"/> PH Philippines                      |
| <input checked="" type="checkbox"/> AM Armenia                            | <input checked="" type="checkbox"/> ID Indonesia                                 | <input checked="" type="checkbox"/> PL Poland                           |
| <input checked="" type="checkbox"/> AT Austria                            | <input checked="" type="checkbox"/> IL Israel                                    | <input checked="" type="checkbox"/> PT Portugal                         |
| <input checked="" type="checkbox"/> AU Australia                          | <input checked="" type="checkbox"/> IN India                                     | <input checked="" type="checkbox"/> RO Romania                          |
| <input checked="" type="checkbox"/> AZ Azerbaijan                         | <input checked="" type="checkbox"/> IS Iceland                                   | <input checked="" type="checkbox"/> RU Russian Federation               |
| <input checked="" type="checkbox"/> BA Bosnia and Herzegovina             | <input checked="" type="checkbox"/> JP Japan                                     | <input checked="" type="checkbox"/> SC Seychelles                       |
| <input checked="" type="checkbox"/> BB Barbados                           | <input checked="" type="checkbox"/> KE Kenya                                     | <input checked="" type="checkbox"/> SD Sudan                            |
| <input checked="" type="checkbox"/> BG Bulgaria                           | <input checked="" type="checkbox"/> KG Kyrgyzstan                                | <input checked="" type="checkbox"/> SE Sweden                           |
| <input checked="" type="checkbox"/> BR Brazil                             | <input checked="" type="checkbox"/> KP Democratic People's Republic of Korea     | <input checked="" type="checkbox"/> SG Singapore                        |
| <input checked="" type="checkbox"/> BY Belarus                            | <input checked="" type="checkbox"/> KR Republic of Korea                         | <input checked="" type="checkbox"/> SK Slovakia                         |
| <input checked="" type="checkbox"/> BZ Belize                             | <input checked="" type="checkbox"/> KZ Kazakhstan                                | <input checked="" type="checkbox"/> SL Sierra Leone                     |
| <input checked="" type="checkbox"/> CA Canada                             | <input checked="" type="checkbox"/> LC Saint Lucia                               | <input checked="" type="checkbox"/> TJ Tajikistan                       |
| <input checked="" type="checkbox"/> CH & LI Switzerland and Liechtenstein | <input checked="" type="checkbox"/> LK Sri Lanka                                 | <input checked="" type="checkbox"/> TM Turkmenistan                     |
| <input checked="" type="checkbox"/> CN China                              | <input checked="" type="checkbox"/> LR Liberia                                   | <input checked="" type="checkbox"/> TN Tunisia                          |
| <input checked="" type="checkbox"/> CO Colombia                           | <input checked="" type="checkbox"/> LS Lesotho                                   | <input checked="" type="checkbox"/> TR Turkey                           |
| <input checked="" type="checkbox"/> CR Costa Rica                         | <input checked="" type="checkbox"/> LT Lithuania                                 | <input checked="" type="checkbox"/> TT Trinidad and Tobago              |
| <input checked="" type="checkbox"/> CU Cuba                               | <input checked="" type="checkbox"/> LU Luxembourg                                | <input checked="" type="checkbox"/> TZ United Republic of Tanzania      |
| <input checked="" type="checkbox"/> CZ Czech Republic                     | <input checked="" type="checkbox"/> LV Latvia                                    | <input checked="" type="checkbox"/> UA Ukraine                          |
| <input checked="" type="checkbox"/> DE Germany                            | <input checked="" type="checkbox"/> MA Morocco                                   | <input checked="" type="checkbox"/> UG Uganda                           |
| <input checked="" type="checkbox"/> DK Denmark                            | <input checked="" type="checkbox"/> MD Republic of Moldova                       | <input checked="" type="checkbox"/> US United States of America         |
| <input checked="" type="checkbox"/> DM Dominica                           | <input checked="" type="checkbox"/> MG Madagascar                                | <input checked="" type="checkbox"/> Continuation-In-Part                |
| <input checked="" type="checkbox"/> DZ Algeria                            | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia | <input checked="" type="checkbox"/> UZ Uzbekistan                       |
| <input checked="" type="checkbox"/> EC Ecuador                            | <input checked="" type="checkbox"/> MN Mongolia                                  | <input checked="" type="checkbox"/> VC Saint Vincent and the Grenadines |
| <input checked="" type="checkbox"/> EE Estonia                            | <input checked="" type="checkbox"/> MW Malawi                                    | <input checked="" type="checkbox"/> VN Viet Nam                         |
| <input checked="" type="checkbox"/> ES Spain                              | <input checked="" type="checkbox"/> MX Mexico                                    | <input checked="" type="checkbox"/> YU Yugoslavia                       |
| <input checked="" type="checkbox"/> FI Finland                            | <input checked="" type="checkbox"/> MZ Mozambique                                | <input checked="" type="checkbox"/> ZA South Africa                     |
| <input checked="" type="checkbox"/> GB United Kingdom                     | <input checked="" type="checkbox"/> NO Norway                                    | <input checked="" type="checkbox"/> ZM Zambia                           |
| <input checked="" type="checkbox"/> GD Grenada                            |  | <input checked="" type="checkbox"/> ZW Zimbabwe                         |
| <input checked="" type="checkbox"/> GE Georgia                            |  |   |
| <input checked="" type="checkbox"/> GH Ghana                              |  |   |

Check-boxes below reserved for designating States which have become party to the PCT after issuance of this sheet:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Precautionary Designation Statement:** In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)

**Supplemental Box**

*If the Supplemental Box is not used, this sheet should not be included in the request.*

1. *If, in any of the Boxes, except Boxes Nos. VIII(i) to (v) for which a special continuation box is provided, the space is insufficient to furnish all the information: in such case, write "Continuation of Box No. ...." (indicate the number of the Box) and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient, in particular:*
  - (i) *if more than two persons are to be indicated as applicants and/or inventors and no "continuation sheet" is available: in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below;*
  - (ii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the indication "the States indicated in the Supplemental Box" is checked: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the applicant(s) involved and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is applicant;*
  - (iii) *if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;*
  - (iv) *if, in addition to the agent(s) indicated in Box No. IV, there are further agents: in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;*
  - (v) *if, in Box No. V, the name of any State (or OAPI) is accompanied by the indication "patent of addition," or "certificate of addition," or if, in Box No. V, the name of the United States of America is accompanied by an indication "continuation" or "continuation-in-part": in such case, write "Continuation of Box No. V" and the name of each State involved (or OAPI), and after the name of each such State (or OAPI), the number of the parent title or parent application and the date of grant of the parent title or filing of the parent application;*
  - (vi) *if, in Box No. VI, there are more than five earlier applications whose priority is claimed: in such case, write "Continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI.*
2. *If, with regard to the precautionary designation statement contained in Box No. V, the applicant wishes to exclude any State(s) from the scope of that statement: in such case, write "Designation(s) excluded from precautionary designation statement" and indicate the name or two-letter code of each State so excluded.*

**Continuation of Box No. V:**

**PCT/US02/33220; 18 October 2002 (18.10.02)**

**Box No. VI PRIORITY CLAIM**

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1)				
item (2)				
item (3)				
item (4)				
item (5)				

☐ Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:

☐ all items    ☐ item (1)    ☐ item (2)    ☐ item (3)    ☐ item (4)    ☐ item (5)    ☐ other, see Supplemental Box

\* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): . . . .

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA / US

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)

Number

Country (or regional Office)

**Box No. VIII DECLARATIONS**

The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

Number of  
declarations

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Box No. VIII (i)   | Declaration as to the identity of the inventor   | : |
| <input type="checkbox"/> Box No. VIII (ii)  | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent             | : |
| <input type="checkbox"/> Box No. VIII (iii) | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : |
| <input type="checkbox"/> Box No. VIII (iv)  | Declaration of inventorship (only for the purposes of the designation of the United States of America)                               | : |
| <input type="checkbox"/> Box No. VIII (v)   | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty   | : |

**Box No. IX CHECK LIST; LANGUAGE OF FILING**

This international application contains:

(a) **In paper form**, the following number of sheets:

request (including declaration sheets) : 6  
 description (excluding sequence listings and/or tables related thereto) : 10  
 claims : 6  
 abstract : 1  
 drawings : 7

Sub-total number of sheets : 30

sequence listings :  
 tables related thereto :

(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)

Total number of sheets : 30

(b) ☐ **only in computer readable form** (Section 801(a)(i))

(i) ☐ sequence listings  
 (ii) ☐ tables related thereto

(c) ☐ **also in computer readable form** (Section 801(a)(ii))

(i) ☐ sequence listings  
 (ii) ☐ tables related thereto

Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the

☐ sequence listings: .....☐ tables related thereto: .....

(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)

This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):

- |   |   |   |
|---|---|---|
| 1. <input checked="" type="checkbox"/> fee calculation sheet  | : | 1 |
| 2. <input type="checkbox"/> original separate power of attorney   | : |   |
| 3. <input type="checkbox"/> original general power of attorney  | : |   |
| 4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any: .....   | : | 3 |
| 5. <input type="checkbox"/> statement explaining lack of signature  | : |   |
| 6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s): .....   | : |   |
| 7. <input type="checkbox"/> translation of international application into (language): .....   | : |   |
| 8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material  | : |   |
| 9. <input type="checkbox"/> sequence listings in computer readable form (indicate type and number of carriers)  | : |   |
| (i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)   | : |   |
| (ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter              | : |   |
| (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listings mentioned in left column  | : |   |
| 10. <input type="checkbox"/> tables in computer readable form related to sequence listings (indicate type and number of carriers)   | : |   |
| (i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)  | : |   |
| (ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) | : |   |
| (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column   | : |   |
| 11. <input checked="" type="checkbox"/> other (specify): Transmittal Letter to the RO/US .....  | : | 1 |

Figure of the drawings which should accompany the abstract:

Language of filing of the international application:

ENGLISH

**Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).



RONALD J. SHORE, Attorney/Agent for Applicants

For receiving Office use only

1. Date of actual receipt of the purported international application:

3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:

4. Date of timely receipt of the required corrections under PCT Article 11(2):

5. International Searching Authority (if two or more are competent): ISA /

6. ☐ Transmittal of search copy delayed until search fee is paid

2. Drawings:

☐ received:☐ not received:

For International Bureau use only

Date of receipt of the record copy by the International Bureau:

# PCT

## POWER OF ATTORNEY

(for an international application filed under the Patent Cooperation Treaty)

(PCT Rule 90.4)

The undersigned applicant(s) (Names should be indicated as they appear in the request):

MOREDOCK, James G.  
12559 Lazy Meadow Drive South  
Jacksonville, FL 32225  
United States of America

hereby appoints (appoint) the following person as:



agent



common representative

Name and address

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

SHORE, Ronald J.  
ANTONELLI, TERRY, STOUT & KRAUS, LLP  
Suite 1800  
1300 North Seventeenth Street  
Arlington, VA 22209  
United States of America

to represent the undersigned before



all the competent International Authorities



the International Searching Authority only



the International Preliminary Examining Authority only

in connection with the international application identified below:

Title of the invention: POWERED AIR CLEANING SYSTEM AND AIR CLEANING METHOD

Applicant's or agent's file reference: 766.42847A00

International application number (if already available):

filed with the following Office United States (RO/US)

as receiving Office

and to make or receive payments on behalf of the undersigned.

Signature of the applicant(s) (where there are several applicants, each of them must sign: next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading the request or this power):

Signature: James G. Moredock

James G. MOREDOCK  
Applicant/Inventor

Date: 4-3-03

**PCT**

**GENERAL POWER OF ATTORNEY**

*(for several international applications filed under the Patent Cooperation Treaty)*

(PCT Rule 90.5)

**The undersigned person(s)**

*(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

**SY-KLONE COMPANY INC.**  
6541-1 Powers Avenue  
Jacksonville, FL 32217  
United States of America

hereby appoints (appoint) the following person as:



agent



common representative

**Name and address**

*(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

**SHORE, Ronald J.**  
**ANTONELLI, TERRY, STOUT & KRAUS, LLP**  
Suite 1800  
1300 N. Seventeenth Street  
Arlington, VA 22209  
United States of America

to represent the undersigned before



all the competent International Authorities



the International Searching Authority only



the International Preliminary Examining Authority only

in connection with any and all international applications filed by the undersigned with the following Office

**United States**

as receiving Office

and to make or receive payments on behalf of the undersigned.

**Signatures of the applicant(s)** *(where there are several persons, each of them must sign; next to the signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading this power):*

X President

Title of Person Signing

X James G. Moredock

James G. MOREDOCK

Date: X September 5, 2000



PCT

**FEE CALCULATION SHEET**  
Annex to the Request

For receiving Office use only

International Application No.

Date stamp of the receiving Office

Applicant's or agent's  
file reference

766.42647A00

Applicant

SY-KLONE COMPANY, INC.

**CALCULATION OF PRESCRIBED FEES**

1. TRANSMITTAL FEE . . . . . 240.00 [T]

2. SEARCH FEE . . . . . 450.00 [S]

International search to be carried out by US  
(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

**Basic Fee**

Where items (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets } 30  
Where items (b) and (c) of Box No. IX do not apply, enter Total number of sheets }

[b1] first 30 sheets . . . . . 407.00 [b1]

[b2] 0 x 9.00 = 0.00 [b2]  
number of sheets in excess of 30 fee per sheet

[b3] additional component (only if sequence listings and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):

400 x            = 0.00 [b3]  
fee per sheet

Add amounts entered at b1, b2 and b3 and enter total at B . . . . . 407.00 [B]

**Designation Fees**

The international application contains 117 designations.

5 x 88.00 = 440.00 [D]  
number of designation fees payable (maximum 5) amount of designation fee

Add amounts entered at B and D and enter total at I . . . . . 847.00 [I]

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT (if applicable) . . . . . 0.00 [P]

5. TOTAL FEES PAYABLE . . . . . USD \$ 1,537.00

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

TOTAL

☐ The designation fees are not paid at this time.

**MODE OF PAYMENT**

☒ authorization to charge deposit account (see below) ☐ postal money order ☐ cash ☐ coupons  
☒ cheque ☐ bank draft ☐ revenue stamps ☐ other (specify):

**AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT**

(This mode of payment may not be available at all receiving Offices)

☐ Authorization to charge the total fees indicated above.  
☒ (This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.  
☐ Authorization to charge the fee for priority document.

Receiving Office: RO/ US

Deposit Account No.: 01-2135

Date: 04 April 2003 (04.04.03)

Name: Ronald J. Shore

Signature: Ronald J. Shore

# TRANSMITTAL LETTER TO THE UNITED STATES RECEIVING OFFICE

Date	04 April 2003 (04.04.03)
International Application No.	Not Assigned
Attorney Docket No.	766.42647A00

## I. Certification under 37 CFR 1.10 (if applicable)

Express Mail mailing number
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Date of Deposit
-----------------

I hereby certify that the application/correspondence attached hereto is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of person mailing correspondence
--

Typed or printed name of person mailing correspondence
--

## II. ☒ New International Application

TITLE	POWERED AIR CLEANING SYSTEM AND AIR CLEANING METHOD
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Earliest priority date (Day/Month/Year)
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**SCREENING DISCLOSURE INFORMATION:** In order to assist in screening the accompanying international application for purposes of determining whether a license for foreign transmittal should and could be granted and for other purposes, the following information is supplied. (Note: check as many boxes as apply):

- A. ☐ The invention disclosed was not made in the United States.
- B. ☐ There is no prior U.S. application relating to this invention.
- C. ☒ The following prior U.S. application(s) contain subject matter which is related to the invention disclosed in the attached international application. (NOTE: priority to these applications may or may not be claimed on form PCT/RO/101 (Request) and this listing does not constitute a claim for priority.)

application no.	60/329,748	filed on	18 October 2001 (18.10.01)
application no.		filed on	

- D. ☒ The present international application contains additional subject matter not found in the prior U.S. application(s) identified in paragraph C. above. The additional subject matter is found on pages throughout the application and ☒ DOES NOT ALTER ☐ MIGHT BE CONSIDERED TO ALTER the general nature of the invention in a manner which would require the U.S. application to have been made available for inspection by the appropriate defense agencies under 35 U.S.C. 181 and 37 CFR 5.1. See 37 CFR 5.15

## III. ☐ A Response to an Invitation from the RO/US. The following document(s) is(are) enclosed:

- A. ☐ A Request for An Extension of Time to File a Response
- B. ☐ A Power of Attorney (General or Regular)
- C. ☐ Replacement pages:

pages		of the request (PCT/RO/101)	pages		of the figures
pages		of the description	pages		of the abstract
pages		of the claims			

- D. ☐ Submission of Priority Documents


Priority document		Priority document	
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- E. ☐ Fees as specified on attached Fee Calculation sheet form PCT/RO/101 annex

## IV. ☐ A Request for Rectification under PCT 91 ☐ A Petition ☐ A Sequence Listing Diskette

## V. ☐ Other (please specify):

The person  
signing this  
form is the:

<input type="checkbox"/> Applicant	RONALD J. SHORE
<input checked="" type="checkbox"/> Attorney/Agent (Reg. No.) 28,577	Typed name of signer
<input type="checkbox"/> Common Representative	 Signature